FEC

STATEMENT OF

FORM 1	ORGANIZ	ATION		
i Ortivi i	(See instruction	ons)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
IMPACT				
ADDRESS (number and	street) 509 Madison Ave.			
(Check if address is changed)	Sujte 1902	11111111	<u> </u>	
	New York		J NY L	10022
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e	-mail address)		
(Check if address is changed)	IMPACT.PAC@gma	il.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)	s			
	<u> </u>			
2. DATE 0 1				
3. FEC IDENTIFICA		C C00348607	-	
o. 120121111107				
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)	
L certify that I have exami	ined this Statement and to the best of my kn	owledge and belief it is true, corre	ect and complete	
	·	-		
Type or Print Name of	Treasurer David A. Barrett	<u> </u>		
Signature of Treasurer	Electronically Filed by David A.	Barrett	Date 0 1	/ 04 / Y Y Y 11
NOTE: Submission of fa	lse, erroneous, or incomplete information ma	ay subject the person signing this	·	
Office	1 1 1			-
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-9	nmission	FEC FORM 1 (Revised 02/2009)